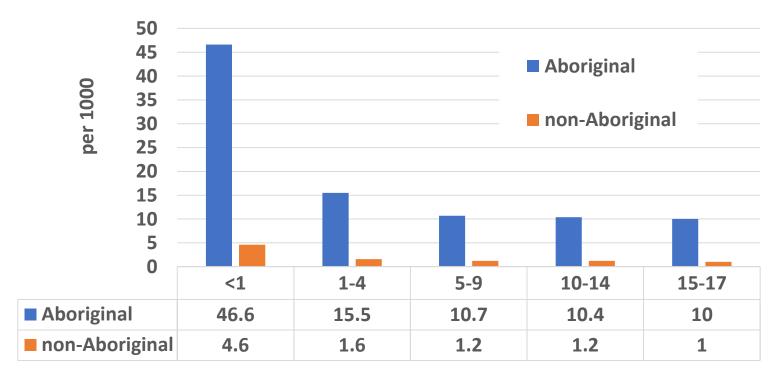
# Infants who entered out-of-home care: child protection and developmental trajectories

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# Aboriginal and non-Aboriginal children admitted to out-of-home care: 2019-20



-National data 2019-20 (AIHW 2021)

# International research evidence

Infants and toddlers entering care more likely to have:

- poor health
- born premature or low birth weight
- have neonatal withdrawal syndrome
- attachment problems
- emotional and/or behavioural problems

These developmental vulnerabilities can impact on longer term outcomes such as school readiness, educational achievement, social-behavioural issues, and mental health conditions.



# **Aims**

**Gap:** Little empirical research on infants entering care in Australia which is essential for ensuring that we are optimising outcomes for this vulnerable group.

### Aims:

- Determine the child protection and developmental trajectories of children who entered care as infants
- 2. Determine whether meeting developmental needs through service provision improves trajectories and outcomes for these children.



# **Pathways of Care Longitudinal Study**

- First large-scale prospective longitudinal study of children and young people in out-of-home care (OOHC) in Australia.
- First study to link data on children's child protection backgrounds, OOHC experiences, health, education and offending held by multiple government agencies; and match it to survey data collected from children, caregivers, caseworkers and teachers.



# **POCLS Sample**

■ A census of all children and young people who entered OOHC for the first time in NSW between May 2010 and October 2011 (18 months) (n=4,126) and received final Children's Court orders by April 2013 (n=2,828).



# **Methods**

**POCLS Sample:** 370 infants (aged <1 year) who entered care and whose carer participated in three waves of survey data

- Linked administrative data NSW Perinatal Data Collection, NSW Admitted Patient Data Collection, DCJ Child Protection Dataset
- Standardised screening tools:

### **Physical-Cognitive assessment**

Ages and Stages Questionnaire (ASQ) aged 9-66 mths

### Socio-emotional assessment

- Brief Infant Toddler Social Emotional Assessment (BITSEA) aged 12-35 mths
- Child Behaviour Checklist (CBCL) ages 3 and above



# **Infant Sample**

	Overall (n=370, 100%)	Non-Aboriginal (n=223, 61%)	Aboriginal (n=145, 39%)
Disability	17.6%	15.1%	21.4%
Socio-economic disadvantage	43.7%	37.3%	53.8%
Entry to OOHC aged 0-3 weeks	43.0%	42.2%	44.1%



# **Child Protection Trajectory**

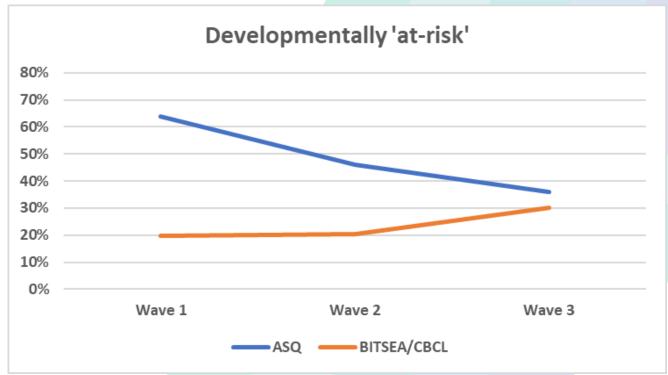
Remaining in care	
Wave 1	97%
Wave 2	96%
Wave 3	78%

### **Transitioned from care**

19% to guardianship, and a small number to adoption, or restoration (confidentiality does not allow us to break down this number).

Improving the lives of vulnerable children.

# Children: developmentally 'at-risk'





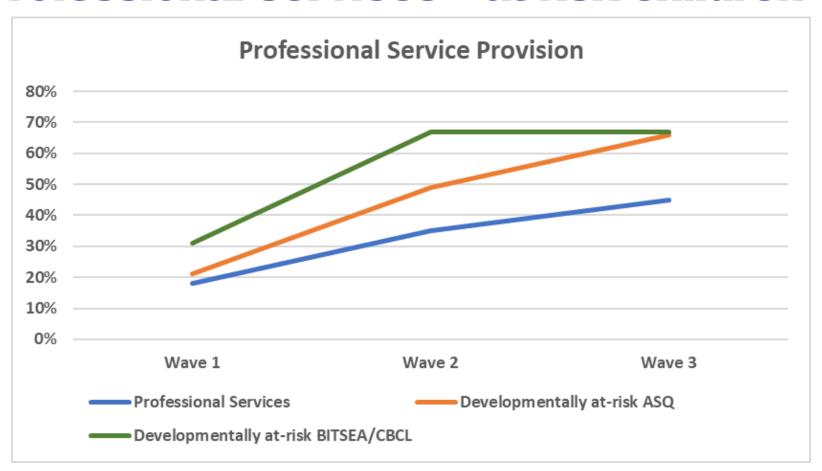
# **Access to Professional Services**







## Professional services – at-risk children



# Ages and Stages Questionnaire

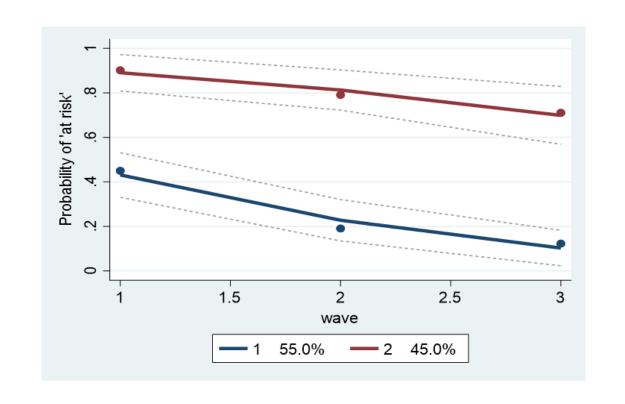
### **Trajectory Groups**

Group 1: Declining developmental risk (55%)

Group 2: Higher likelihood of developmental risk which declined at a lower rate.(45%)

Group 1 were more likely to be female

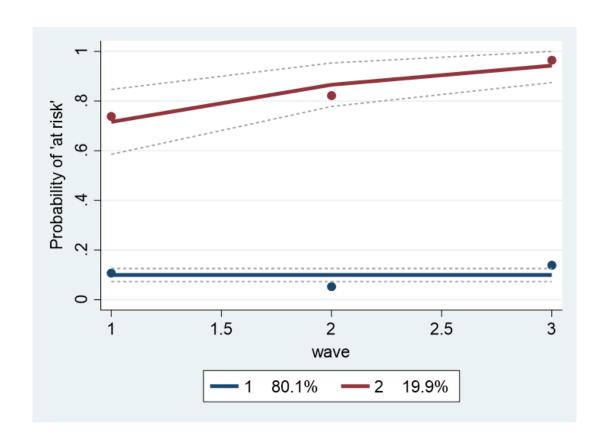
Group 2 more likely to be receiving services.



# BITSEA/CBCL

### **Trajectory Groups**

- Group 1: Low risk of socioemotional issues which remained stable (80%)
- Group 2: Higher likelihood of socio-emotional risk which increased over time (20%)
- Group 2 less likely to be female, and in kinship care. More likely to have 3 or more placements and disability.



# **Key Findings and Implications**

- The majority of children who enter care as infants will remain in care into their childhood.
- A high level of developmental vulnerability identified as infants.
- A large proportion of infants have positive cognitive-behavioural developmental trajectories with service provision increasing over time.
- However important to ensure service provision is provided early in their development.



# **Key Findings and Implications**

- Socio-emotional development was found to be different.
- There was a group of infants who had early social-emotional concerns who displayed worsening trajectories.
- Interventions for this group is an important priority to reduce the risk of poor trajectories and poor mental health outcomes.
- Important for infants to have ongoing health and care plans with regular reviews, monitoring and developmental support to meet their needs.



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